Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	06/27/10	Address:	916 N. Phillips
Case #:	<u>16F19796</u>		Kokomo, IN 46901
County:	<u>Howard</u>		
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
Chemic	onal Lab al/Glassware/Equipment (only) te (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☑ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): One Pot-Open No Structure			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents: Open No Structure			
Water Reactive Metal (Lithium): Open No Structure			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid: Open No Structure			
Corrosive Base: Open No Structure			
Other (item and location):			
 Yes n/a No 	r age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrine	<u>Information</u> Pseudoephedrine Tracking Log rchant Tip
This report	is to be faxed to the following agen	cies that serve the lo	cation:
Fire Departr	nent: Kokomo F.D.	Fax: <u>765-4</u> :	<u>56-7580</u>
Health Department: Howard Co.		Fax: <u>765-4:</u> Fax:	
Child Protec	etion Service: <u>N/A</u>	1 as	
For further i	nformation regarding this methamphe g Officer: <u>R.A. Burgess</u> Phor	etamine laboratory, co ne 765-473-6666	entact

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.